

MAR 2 7 2000

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Dr. P Armstrong Regulatory Affairs Randox Laboratories, Ltd. Ardmore, Diamond Road, Crumlin, Co. Antrim, United Kingdom, BT29 4QY

Re: K000469

Trade Name: Complement C3

Regulatory Class: II Product Code: CZW Dated: January 27, 2000 Received: February 11, 2000

Dear Dr. Armstrong:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4588. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Sincerely yours,

Steven I. Gutman, M.D., M.B.A.

Director

Division of Clinical Laboratory Devices

Steven Butman

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

10(k) Number (if known):	-notknown K <i>0</i> 00469	
Device Name:	COMPLEMENT C3	
Indications For Use :		
quantitative determination of C assay in which a sample is dilu human Complement C3. The a concentration of C3 in the sam standards, the C3 concentration Complement C3 in serum is in	omplement C3 in serum ited and reacted with a basorbance of the resulting less by constructing a stan of the sample can be apportant in determining a variety of inflammatory	t is an <i>in vitro</i> diagnostic reagent for the . The method is an immunoturbidimetric ouffer containing antibody specific for ng turbid solution is proportional to the andard curve from the absorbance of the determined. The measurement of inherited or acquired deficiencies whilst, and necrotic disorders as part of the
This Application Sheet has been uitably qualified laboratory per	•	achi 717 Analyser and must be used by te laboratory conditions.
(PLEASE DO NOT WRITE BEI	LOW THIS LINE-CONTI	NUE ON ANOTHER PAGE IF NEEDED)
(Distriction Co.)	n as grane carrosa 17 a .	
Prescription Use (Per 21 CFR 801.109)	OR	Over-The-Counter Use (Optional format 1-2-96)